

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: Housing Authority of the City of Shreveport PHA Code: LA002 PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: 10/1/2009												
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 665 Number of HCV units: 3,274												
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only												
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)												
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program <table border="1"> <tr> <th>PH</th><th>HCV</th></tr> <tr> <td></td><td></td></tr> <tr> <td></td><td></td></tr> <tr> <td></td><td></td></tr> </table>	PH	HCV						
PH	HCV												
	PHA 1:												
	PHA 2:												
	PHA 3:												
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.												
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:  The HACS will provide decent, safe and affordable housing and a network of resources to help assisted families in their effort to become self-reliant. Even though the Authority is not mandated to provide all direct social services to residents, it has a responsibility to help them secure such services. As a steward of the taxpayer funds, the Authority will hire quality employees and encourage excellence to ensure that the authority will achieve and maintain high performance standards.												
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.  Increase the availability of decent, safe and affordable housing by expanding the existing supply; Apply for additional Vouchers.; reduce public housing vacancies; concentrate on and improve customer satisfaction; Revitalize and / expand voucher and public housing homeownership program; Increase the percentage of working families in public housing and the voucher program; modernize existing public housing sites as able; Apply for a HOPE VI / Low Income Tax Credit/ or Choice Neighborhoods grant using Mixed Finance to increase affordable housing on the Naomi Jackson Heights vacant./												
<b>6.0</b>	<b>PHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.  (a) Indoor Quality and minor rehabilitation at Wilkinson Terrace. (b) The HACS main office at 2500 Line Ave – Shreveport, LA – and HACS Website												
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> Include statements related to these programs as applicable.  To apply for a HOPE VI / Choice Neighborhoods Grant utilization Mixed Finance along with a combination of Project Based Vouchers and other funding methods.												
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.												
<b>8.1</b>	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.  See Attachment												

8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>See Attachment</p>
8.3	<p><b>Capital Fund Financing Program (CFFP).</b>  <input checked="" type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p> <p>Replacement Housing Factor Funds.</p>
9.0	<p><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>See attachment 8.</p>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p>The HACS will evaluate the need to open its waiting list as needed; apply for additional Housing Vouchers as able; revitalize the public housing and housing voucher homeownership program; apply for HOPE VI/ Choice Neighborhoods grants; Work with e City of Shreveport to acquire land for homeownership opportunities.</p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>The HACS five year plan has as its highest priority to improve the quality of life for the people it serves. This is accomplished with development of partnerships with public and private groups which include nonprofit housing entities, churches, schools district, colleges and the City of Shreveport to accomplish its mission.</p> <p>Significant Amendment or Modification – Changes to rent or admission policies; changes to the organization of the waiting list; changes to tenant selection criteria; change to the use of replacement reserve funds under Capital Fund program; changes to the current Grievance or Informal Hearing Procedures.</p> <p>Substantial Deviation – Any change or development to the agency Mission Statement; change to the deletion to a goal, objective that is included in the Five Year Plan;</p>
11.0	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>



**Capital Fund Program—Five-Year Action Plan**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2011

<b>Part I: Summary</b>						
PHA Name/Number: Housing Authority of the City of Shreveport		Locality (City/County & State) Shreveport/Caddo/Louisiana			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name Housing Authority of the City of Shreveport (LA002)	Work Statement for Year 1 FFY _2011	Work Statement for Year 2 FFY ____2012____	Work Statement for Year 3 FFY ____2013____	Work Statement for Year 4 FFY ____2014____	Work Statement for Year 5 FFY ____2015____
B.	Physical Improvements Subtotal	Annual Statement	\$708,085.00	\$708,085.00	\$708,085.00	\$480,947.00
C.	Management Improvements		\$ 63,000.00	\$63,000.00	\$63,000.00	\$200,000.00
D.	PHA-Wide Non-dwelling Structures and Equipment		\$43,000.00	\$43,000.00	\$43,000.00	\$140,000.00
E.	Administration		\$101,200.00	\$101,200.00	\$101,200.00	\$100,000.00
F.	Other		\$89,500.00	\$89,500.00	\$89,500.00	\$ 83,838.00
G.	Operations		\$50,000.00	\$50,000.00	\$50,000.00	\$100,000.00
H.	Demolition		\$0.00	\$0.00	\$0.00	\$0.00
I.	Development		\$50,000.00	\$50,000.00	\$50,000.00	\$0.00
J.	Capital Fund Financing – Debt Service		\$0.00	\$0.00	\$0.00	\$0.00
K.	Total CFP Funds		\$1,104,785.00	\$1,104,785.00	\$1,104,785.00	\$1,104,785.00
L.	Total Non-CFP Funds					
M.	Grand Total		\$1,104,785.00	\$1,104,785.00	\$1,104,785.00	\$1,104,785.00

**U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/20011**

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**Part II: Supporting Pages – Physical Needs Work Statement(s)**

Work Statement for Year 1 FFY ____2011	Work Statement for Year ____2____ FFY ____2012____			Work Statement for Year: ____2____ FFY ____2012____		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	LA 2-1 Naomi D. Jackson Heights			LA 2-3 Hollywood Heights		
Annual	a. Develop mixed finance replacement		\$50,000.00	a. Site Improvements		\$20,000.00
Statement	housing units Hope VI APP / Choice Neighborhoods App					
				b. Foundation Underpinning		\$15,000.00
	b. Extend Lawn &		\$8,000.00			
	Maintenance Program			LA 2-5 Barton Drive Manor		
				a. Foundation Underpinning		\$15,000.00
	LA 2-2 Wilkinson Terrace		\$18,000.00			
	a. Extend Lawn & Ground			b. Brick A/C openings		\$25,000.00
	Maintenance Program					
				LA 2-7 Briarwood Village		
	b. Repair plaster walls & ceilings		\$3,000.00	a. Lawn & Ground Maintenance Program		\$6,000.00
	c. Wall Furnace Replacement		\$2,000.00			
				LA 2-9 & 10		
				a. Kitchen and Bathroom replacement, Paint units		\$222,835.00
				b. Relocation Cost during Mod		\$20,000.00
	Subtotal of Estimated Cost		\$81,000.00	Subtotal of Estimated Cost		\$323,835.00

**U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/20011**

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Office of Public and Indian Housing  
Expires 4/30/20011**

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<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY ____2011____	Work Statement for Year ____3____ FFY ____2013____			Work Statement for Year: ____3____ FFY ____2013____		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	HA-WIDE			f. Replacement of Playground Equipment		\$2,000.00
Annual						
Statement	a. Replacement of dwelling equipment (i.e. Ranges & refrigerators)		\$31,750.00	g. Replace Automotive Equipment		\$20,000.00
				h. Purchase Maintenance Equipment		\$3,000.00
	b. Replacement of kitchen & bathroom Cabinets to include trim		\$15,000.00			
				i. Repair driveways, sidewalks and parking Lots, paint lots to include 504 parking		\$25,000.00
	c. Tree Maintenance Program		\$2,500.00			
				j. Upgrade 504 units		\$2,000.00
	d. Replacement of VCT in Vacant units		\$ 35,000.00			
				k. HVAC System Replacement on (1480)		\$20,000.00
	e. Replacement of Hot Water Heaters		\$ 3,000.00	l. Enhance Site Lighting		\$2,500.00
				m. Replace sanitary field lines and install clean outs		\$1,500.00
				n. Roof Replacement		\$98,000.00
				o. HVAC Replacement on (1470)		\$10,000.00
				p. Retrofit dwelling units to energy efficient green		\$20,000.00
	Subtotal of Estimated Cost		\$87,250.00	Subtotal of Estimated Cost		\$204,000.00

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY ____2010__	Work Statement for Year ____4____ FFY ____2014____			Work Statement for Year: ____4____ FFY ____2014____		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	See	LA 2-1 Naomi D. Jackson Heights				
Annual						
Statement	a. Develop mixed-finance replacement Housing units HOPE VI App / Choice Neighborhoods		\$50,000.00			
				LA 2-7 Briarwood Village		
	b. Extend Lawn & Maintenance Program		\$8,000.00			
				a. Lawn & Ground Maintenance Program		\$6,000.00
	LA 2-2 Wilkinson Terrace					
	a. Lawn & Ground Maintenance Program		\$18,000.00	LA 2-10 & 11		
	b. Repair plaster walls and ceilings		\$3,000.00	a. Kitchen and bathroom replacements, paint units		\$289,835.00
	c. Wall Furnace Replacement		\$2,000.00	b. Relocation cost during Mod		\$20,000.00
	LA 2-3 Hollywood Heights					
	a. Site Improvements		\$20,000.00			
	Subtotal of Estimated Cost		\$101,000.00	Subtotal of Estimated Cost		\$315,835.00

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY ____2011__	Work Statement for Year ____4____ FFY ____2014____			Work Statement for Year: ____4____ FFY ____2014____		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	HA-WIDE			f. Replacement of Playground Equipment		\$2,000.00
Annual						
Statement	a. Replacement of dwelling equipment (i.e. Ranges & refrigerators)		\$31,750.00	g. Replace Automotive Equipment		\$20,000.00
	b. Replacement of kitchen & bathroom cabinets to include trim		\$15,000.00	h. Purchase Maintenance Equipment		\$3,000.00
	c. Tree Maintenance Program		\$2,500.00	i. Repair driveways, sidewalks and parking lots to include 504 parking		\$25,000.00
				j. Upgrade 504 units		\$2,000.00
	e. Replacement of VCT in vacant units		\$35,000.00	k. HVAC System Replacement on (1480)		\$20,000.00
				l. Enhance Site Lighting		\$2,500.00
	f. Replacement of hot water heaters		\$ 3,000.00	m. Replace sanitary field lines and install clean outs		\$1,500.00
				n. Roof Replacement		\$98,000.00
				o. HVAC Replacement on (1470)		\$10,000.00
				p. Retrofit dwelling units to energy efficient green		\$20,000.00
	Subtotal of Estimated Cost		\$87,250.00	Subtotal of Estimated Cost		\$204,000.00

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY __2011__	Work Statement for Year ____5____ FFY ____2015____			Work Statement for Year: ____5____ FFY ____2015____		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	See	HA-WIDE			HA-WIDE	
Annual	a. Tree Maintenance		\$5,000.00			
Statement	b. Correct Drainage problems		\$30,000.00	a. Replace Sewage & Water Lines		\$17,000.00
	c. Extend Lawn Service		\$90,000.00			
	d. Replace sidewalks and driveways		\$28,754.00	b. Replace Playground Equipment		\$17,000.00
	e. Paint, strip and signage at parking areas		\$5,000.00			
				c. Replace VCT (1460) in Dwelling Units		\$20,000.00
	LA 2-9 & 2-10					
	a. Kitchen and bathroom replacements, paint units		\$360,193.00	d. Replace floors in (1470)		\$10,000.00
	HA-WIDE					
	a. Foundation Underpinning		\$5,000.00			
	b. Relocation cost during Mod		\$8,000.00			
	c. HVAC Replacement (1460)		\$10,000.00			
	d. HVAC Replacement (1470)		\$5,000.00			
	e. Replace Water Heaters		\$1,000.00			
	f. Replace Stoves & Refrigerators		\$9,000.00			
	Subtotal of Estimated Cost		\$556,947.00	Subtotal of Estimated Cost		\$64,000.00

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY ____2011____	Work Statement for Year ____2____ FFY ____2012____		Work Statement for Year: ____3____ FFY ____2013____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	HA-WIDE		HA-WIDE	
Annual				
Statement	a. Staff & Resident Training	\$10,000.00	a. Staff & Resident Training	\$10,000.00
	b. Purchase & Upgrade Computer System	\$10,000.00	b. Purchase & Upgrade Computer System	\$10,000.00
	c. Perform Energy Audit	\$10,000.00	c. Perform Energy Audit	\$10,000.00
	d. Perform Physical Needs Assessment	\$100,000.00	d. Perform Physical Needs Assessment	\$100,000.00
	d. Hope VI/Choice Neighborhood Applications	\$30,000.00	d. Hope VI/Choice Neighborhood Applications	\$30,000.00
	e. Employ Fee Accountant to Audit Public Housing Asset Management Program	\$20,000.00	e. Employ Fee Accountant to Audit Public Housing Asset Management Program	\$20,000.00
	f. Perform UPCS Inspections	\$20,000.00	f. Perform UPCS Inspections	\$20,000.00
	Subtotal of Estimated Cost	\$200,000.00	Subtotal of Estimated Cost	\$200,000.00

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY _2011_	Work Statement for Year ____4____ FFY ____2014____		Work Statement for Year: ____5____ FFY ____2015____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	See	HA-WIDE		HA-WIDE
Annual				
Statement	a. Staff & Resident Training	\$10,000.00	a. Staff & Resident Training	\$10,000.00
	b. Purchase & Upgrade Computer System	\$10,000.00	b. Purchase & Upgrade Computer System	\$10,000.00
	c. Perform Energy Audit	\$10,000.00	c. Perform Energy Audit	\$10,000.00
	d. Perform Physical Needs Assessment	\$100,000.00	d. Perform Physical Needs Assessment	\$100,000.00
	d. Hope VI/Choice Neighborhood Applications	\$30,000.00	d. Hope VI/Choice Neighborhood Applications	\$30,000.00
	e. Employ Fee Accountant to Audit Public Housing Asset Management Program	\$20,000.00	e. Employ Fee Accountant to Audit Public Housing Asset Management Program	\$20,000.00
	f. Perform UPCS Inspections	\$20,000.00	f. Perform UPCS Inspections	\$20,000.00
	Subtotal of Estimated Cost	\$200,000.00	Subtotal of Estimated Cost	\$200,000.00

Work Statement for Year 1 FFY _2011_	Work Statement for Year _____ FFY _____		Work Statement for Year: _____ FFY _____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual				
Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

## **CAPITAL FUND PROGRAM TABLES START HERE**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHA Name: Housing Authority of the City of Shreveport		Grant Type and Number Capital Fund Program Grant No: <b>LA48P002501-08</b> Replacement Housing Factor Grant No:			Federal FY of Grant: <b>FY 2008</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <b>04/30/11</b> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs	\$63,000.00		\$3,862.02	\$3,862.02
	Management Improvements Hard Costs				
4	1410 Administration	\$98,500.00		\$63,199.50	\$63,199.50
5	1411 Audit	\$5,000.00		0.00	0.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$25,000.00		\$8,772.12	\$8,772.12
8	1440 Site Acquisition	\$2,550.00		0.00	0.00
9	1450 Site Improvement	\$60,000.00		\$25,050.00	\$25,050.00
10	1460 Dwelling Structures	\$653,373.00	\$896,919.55	\$896,919.55	\$896,919.55
11	1465.1 Dwelling Equipment—Nonexpendable	\$31,750.00		0.00	0.00
12	1470 Nondwelling Structures	\$25,000.00		\$4,006.66	\$4,006.66
13	1475 Nondwelling Equipment	\$32,500.00	\$46,976.00	\$46,976.00	\$46,976.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	\$15,000.00		\$12,887.15	\$12,887.15
18	1499 Development Activities	\$50,000.00		0.00	0.00



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: Housing Authority of the City of Shreveport		Grant Type and Number Capital Fund Program Grant No: <b>LA48P002501-08</b> Replacement Housing Factor Grant No:		Federal FY of Grant: <b>FY 2008</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 04/30/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 - 20)	\$1,061,673.00	\$943,895.55	\$1,061,673.00	\$768,642.33
22	Amount of line XX Related to LBP Activities				
23	Amount of line XX Related to Section 504 compliance				
24	Amount of line XX Related to Security –Soft Costs	\$25,000.00	0.00	0.00	0.00
25	Amount of Line XX related to Security-- Hard Costs		\$40,000.00	\$40,000.00	\$40,000.00
26	Amount of line XX Related to Energy Conservation Measures	\$735,332.00			

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHA Name: <b>Housing Authority of the City of Shreveport</b>			<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>LA48P002501-08</b> Replacement Housing Factor Grant No:				<b>Federal FY of Grant: FY2008</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	a. Extend HA Staff Training Programs		1408		\$7,000.00		0.00	0.00	
MGMT. IMPR	(PHAS, MASS, REAC, RIM PIC,								
	Asset Management, Project-Based								
	Accounting, Software Administrative,								
	Management and Maintenance Job								
	Training)								
	b. Extend Homeownership Counseling		1408		\$1,000.00		0.00	0.00	
	and Training								
	c. Conduct Public Housing Utility		1408		\$10,000.00		\$2,400.00	\$2,400.00	Complete
	Allowance Study								
	d. Extend Physical Security Program		1408		\$25,000.00		0.00	0.00	
	LA 2-1 & 2								
	e. Conduct Resident Education & Job		1408		\$5,000.00	0.00	0.00	0.00	
	Training Program								

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHA Name: <b>Housing Authority of the City of Shreveport</b>			<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>LA48P002501-08</b> Replacement Housing Factor Grant No:				<b>Federal FY of Grant: FY2008</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	f. Purchase Software Program for		1408		\$10,000.00		0.00	0.00	
MGMT IMPR.	Asset Management								
	g. Employ Fee Accountant to assist		1408		\$ 5,000.00		0.00	0.00	
	with Asset Management Start-up								
	Total				\$63,000.00		\$2,400.00	\$2,400.00	

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: <b>Housing Authority of the City of Shreveport</b>		Grant Type and Number Capital Fund Program Grant No: <b>LA48P002501-08</b> Replacement Housing Factor Grant No:					Federal FY of Grant: <b>FY2008</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	a. CFP Full-time & Prorata Staff Salaries		1410.1		\$65,000.00		\$57,511.55	\$57,511.55	
Administration									Complete
	b. CFP Full-time & Prorata Staff Benefits & Contributions		1410.9		\$30,000.00		\$5,687.95	\$5,687.95	Complete
	c. CFP Staff travel during Mod		1410.10		\$1,500.00		0.00	0.00	
	d. CFP Publications & Reproduction Cost		1410.12		\$1,500.00		0.00	0.00	
	e. CFP Sundry Costs		1410.19		\$1,000.00		0.00	0.00	
	Total				\$98,000.00		\$63,199.50	\$63,199.50	

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHA Name: <b>Housing Authority of the City of Shreveport</b>			<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>LA48P002501-08</b> Replacement Housing Factor Grant No:				<b>Federal FY of Grant: FY2008</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
HA WIDE	a. FY'04 & 05 CFP Audit Costs		1411		\$2,500.00		0.00	0.00	
AUDIT									
	b. Auditor's Certification to REAC's		1411		\$2,500.00		0.00	0.00	
	Submission Cost								
	Total				\$5,000.00		0.00	0.00	

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: <b>Housing Authority of the City of Shreveport</b>		Grant Type and Number Capital Fund Program Grant No: <b>LA48P002501-08</b> Replacement Housing Factor Grant No:					Federal FY of Grant: <b>FY2008</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
HA WIDE A&E			1430		\$25,000.00		\$10,234.14	\$6,213.59	Complete
Contract Admin									
Fee									
Total					\$25,000.00		\$10,234.14	\$6,213.59	

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

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**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: Housing Authority of the City of Shreveport		Grant Type and Number Capital Fund Program Grant No: LA48P002501-08 Replacement Housing Factor Grant No:					Federal FY of Grant: FY2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	a. Extend Lawn Maintenance Program		1450		\$55,000.00		\$25,050.00	\$25,050.00	Complete
SITE	LA 2-2 & 7								
IMPROVEMENTS									
	b. Post REAC Inspections Exigent		1450		\$5,000.00		0.00	0.00	
	Health & Safety Repairs to sidewalk, paving & driveways								
	c. Tree Maintenance Program		1450		\$2,500.00		0.00	0.00	
	Total				\$60,000.00		\$25,050.00	\$25,050.00	



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: <b>Housing Authority of the City of Shreveport</b>		Grant Type and Number Capital Fund Program Grant No: <b>LA48P002501-08</b> Replacement Housing Factor Grant No:					Federal FY of Grant: <b>FY2008</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	a. Replacement of Kitchen & bath		1460	30	\$15,000.00		0.00	0.00	
DWELLING	cabinets including trim								
STRUCTURED									
	b. Replacement of VCT flooring and		1460	60	\$35,000.00		\$3,869.50	\$3,869.50	Complete
	Baseboards								
	c. Termite Inspections & Certifications		1460	5	\$500.00		0.00	0.00	
	cost on Homeownership Units in								
	LA 2-3, 8, 9, 10 & 11								
	d. Post REAC Inspections Exigent		1460		\$15,000.00		\$105,310.00	\$105,310.00	Complete
	Health & Safety Repairs to dwelling								
	units								
	e. Refinish plaster walls & ceilings		1460		\$3,000.00		\$200.00	\$200.00	Complete

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

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**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: <b>Housing Authority of the City of Shreveport</b>		Grant Type and Number Capital Fund Program Grant No: <b>LA48P002501-08</b> Replacement Housing Factor Grant No:					Federal FY of Grant: <b>FY2008</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	a. Replacement of Ranges		1465	50	\$13,000.00		0.00	0.00	
DWELLING	@ \$260.00 each								
EQUIPMENT									
	b. Replacement of Refrigerators		1465	50	\$18,750.00		0.00	0.00	
	@ \$375.00 each								
Total					\$31,750.00		0.00	0.00	

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHA Name: <b>Housing Authority of the City of Shreveport</b>			<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>LA48P002501-08</b> Replacement Housing Factor Grant No:				<b>Federal FY of Grant: FY2008</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
HA-WIDE PLANNING COST					Original	Revised	Funds Obligated	Funds Expended	
Non-Dwelling Structure	a. Paint exterior and repair wood Surfaces on Admin Office		1470		\$25,000.00		\$4,006.66	\$4,006.66	Complete
	Total				\$25,000.00		\$4,006.66	\$4,006.66	

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: Housing Authority of the City of Shreveport		Grant Type and Number Capital Fund Program Grant No: LA48P002501-08 Replacement Housing Factor Grant No:					Federal FY of Grant: FY2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	a. Replace Maintenance Power		1475.2		\$2,500.00		\$2,486.00	\$2,486.00	
NON-DWELLING STRUCTURES	Equipment								
	b. Upgrade computer hardware		1475.1		\$5,000.00		0.00	0.00	
	c. Expand security surveillance system				\$25,000.00	\$40,000.00	\$40,000.00	\$40,000.00	Complete
	d. Replace AC equipment at 2-2 OMC				0.00	\$4,490.00	\$4,490.00	\$4,490.00	Complete
	Total				\$32,500.00	\$44,490.00	\$46,976.00	\$46,976.00	

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: Housing Authority of the City of Shreveport		Grant Type and Number Capital Fund Program Grant No: <b>LA48P002501-08</b> Replacement Housing Factor Grant No:					Federal FY of Grant: FY2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	a. Continue Relocation of Residents		1495.1		\$15,000.00		\$12,784.27	\$12,784.27	Complete
RELOCATION	during modernization of dwelling								
	units in LA 2-3								
	Total				\$15,000.00		\$12,784.27	\$12,784.27	

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: Housing Authority of the City of Shreveport		Grant Type and Number Capital Fund Program Grant No: <b>LA48P002501-08</b> Replacement Housing Factor Grant No:					Federal FY of Grant: FY2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
DEVELOPMENT ACTIVITIES	a. Development of mixed-finance replacement housing units		1499		\$50,000.00		0.00	0.00	
	Total				\$50,000.00		0.00	0.00	

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: Housing Authority of the City of Shreveport			Grant Type and Number Capital Fund Program No: <b>LA48P002501-08</b> Replacement Housing Factor No:			Federal FY of Grant: FY 2008	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-WIDE							
MGMT. IMPMT.							
A.	09-30-09						
B.	09-30-09						
C.	09-30-09						
D.	09-30-09						
E.	09-30-09						
F.	09-30-09						
G.	09-30-09						
HA-WIDE							
ADMINISTRATION							
A.	09-30-09						
B.	09-30-09						
C.	09-30-09						
D.	09-30-09						
E.	09-30-09						



<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: <b>Housing Authority of the City of Shreveport</b>			Grant Type and Number Capital Fund Program No: <b>LA48P002501-08</b> Replacement Housing Factor No:			Federal FY of Grant: <b>2008</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-WIDE AUDIT							
COST							
A.	09-30-09						
B.	09-30-09						
C.	09-30-09						
HA-WIDE PLANNING							
COSTS							
A.	09-30-09						
HA-WIDE SITE							
IMPROVEMENT							
A.	09-30-09						
B.	09-30-09						

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

PHA Name: Housing Authority of the City of Shreveport		Grant Type and Number Capital Fund Program No: <b>LA48P002501-08</b> Replacement Housing Factor No:				Federal FY of Grant: <b>2008</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-WIDE DWELLING STRUCTURES							
A.	09-30-09						
B.	09-30-09						
C.	09-30-09						
D.	09-30-09						
E.	09-30-09						
F.	09-30-09						
G.	09-30-09						
H.	09-30-09						
I.	09-30-09						
HA-WIDE DWELLING EQUIPMENT							
A.	09-30-09						
B.	09-30-09						

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

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Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>					
<b>PHA Name: Housing Authority of the City of Shreveport</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P002501-11 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2011</b> <b>FFY of Grant Approval: 2011</b>
<b>Type of Grant</b> <input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:      )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	\$100,000			
3	1408 Management Improvements	\$200,000			
4	1410 Administration (may not exceed 10% of line 21)	\$80,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$70,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	\$35,000			
10	1460 Dwelling Structures	\$574,197			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$15,000			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	\$40,000			
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

<b>Part I: Summary</b>					
<b>PHA Name:</b> <b>Housing Authority</b> <b>of the City of</b> <b>Shreveport</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P002501-11 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2011</b> <b>FFY of Grant Approval: 2011</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:        ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,104,197.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Shreveport		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P002501-11 CFFP (Yes/ No): Yes Replacement Housing Factor Grant No:			Federal FFY of Grant: 2011			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA - Wide	Operations	1406		\$100,000				
HA-Wide	Management Improvements	1408						
	Security	1408		\$60,000				
	Staff / Resident Training	1408		\$25,000				
	Purchase/Upgrade Computer System	1408		\$82,000				
	UPCS Inspections	1408		\$8,000				
	Hope VI / Choice Neighborhoods App	1408		\$25,000				
	Total	1408		\$200,000				
HA - Wide	Administration	1410						
	CFP Salaries	1410		\$60,000				
	CFP Benefits	1410		\$20,000				
	Total	1410		\$80,000				
HA -Wide	A & E Fees	1430		\$70,000				

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
PHA Name:		<b>Grant Type and Number</b> Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant:			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
LA 2-5 Barton Drive	Repair driveways, sidewalks, parking lots and stripe lots	1450		\$35,000				
	Foundation underpinnings, level / correct interior floors, walls and ceilings, paint interior units, brick exterior a/c openings	1460		\$574,197				
HA Wide	Purchase equipment / Power washers, floor strippers, drain cleaners	1475		\$15,000				
LA 2-5 Barton Drive	Relocation Moving	1495.1		25,000				
	Relocation Expenses	1495.0		15,000				

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	9/30/2012				
1406 - Operations	9/30/2012				
1408 - Mgt Improvements	9/30/2012				
1410 - Administration	9/30/2012				
1430 - A & E Fees	9/30/2012				
1450 Site Improvements	9/30/2012				
1460 Dwelling Structures	9/30/2012				
1475 Non Dwelling Equip	9/30/2012				

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.



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Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>					
<b>PHA Name:</b> Housing Authority of the City of Shreveport		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P002501-09 Replacement Housing Factor Grant No: Date of CFFP: 4/30/11			<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval: 2009</b>
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 4/30/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		\$ 40,000.00	\$40,000	\$40,000
3	1408 Management Improvements		\$ 40,000.00	\$800.00	\$800.00
4	1410 Administration (may not exceed 10% of line 21)		\$ 90,000.00		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs		\$ 10,000.00	\$1,462.02	\$1,462.02
8	1440 Site Acquisition				
9	1450 Site Improvement		\$ 20,000.00		
10	1460 Dwelling Structures		\$865,197.00	\$850,298.50	\$850,298.50
11	1465.1 Dwelling Equipment—Nonexpendable		\$ 5,000.00		
12	1470 Non-dwelling Structures		\$ .00		
13	1475 Non-dwelling Equipment		\$ 5,000.00	\$140,000.00	
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs		\$ 24,000.00	\$3,630.00	\$3,630.00
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

<b>Part I: Summary</b>					
<b>PHA Name:</b> <b>\$Housing Authority</b> <b>of the City of</b> <b>Shreveport</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P002501-09 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval: 2009</b>
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/10 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)		\$1,104,197.00	1,036,190.52	\$896,190.52
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Shreveport			<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P002501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2009</b>		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA-WIDE	Total Operations	1406			\$40,000.00	\$40,000	\$40,000	
LA2-2	a. Extend Physical Security Program	1408			\$20,000.00			
HA-WIDE	b. Staff Training, UPCS Inspections, Utility Allowance Study, Security	1408			\$20,000.00	\$800.00	\$800.00	
	TOTAL	1408			\$40,000.00			
HA-WIDE	a. CFP Full-time & Prorata Staff Salaries	1410.0			\$60,000.00			
Administration	b. CFP Full-time & Prorata Staff Benefits & Contributions	1410.9			\$25,000.00			
	c. CFP Staff travel during Mod	1410.10			\$ 3,000.00			
	d. CFP Publications & Reproduction Cost	1410.12			\$ 1,000.00			
	e. CFP Sundry Costs	1410.19			\$ 1,000.00			
	TOTAL	1410			\$90,000.00			
HA-WIDE	a. A&E Fees for Contract Administration	1430			\$10,000.00	\$1,462.02	\$1,462.02	
PLANNING COST	Administration							
	TOTAL	1430			\$10,000.00			

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Shreveport		Grant Type and Number Capital Fund Program Grant No: LA48P002501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA-WIDE SITE IMPROVEMENTS	a. Lawn Service, Tree Removal TOTAL	1450 1450			\$20,000.00 \$20,000.00			
HA-WIDE DWELLING STRUCTURES	a. Complete Modernization of Hollywood Heights TOTAL	1460 1460			\$865,197.00 \$865,197.00	\$850,298.50 \$850,298.50	\$850,298.00 \$850,298.00	
HA-WIDE Dwelling Equipment	a. Replacement of outdated water heaters TOTAL	1465 1465			\$ 5,000.00 \$ 5,000.00			
PHA-WIDE Non- Dwelling Structures	a. Replace outdated HVAC System TOTAL	1470 1470			\$ 5,000.00 \$ 5,000.00			
HA-WIDE Non- Dwelling Equipment	a. Purchase 7 Maintenance trucks b. TOTAL	1475.1 1475.1 1475.1			\$140,000.00 \$ \$	\$140,000		
HA-WIDE Relocation	a. Continue Relocation of Residents during modernization of dwelling units in LA 2-3 TOTAL	1495.1 1495.1			\$ 24,000.00 \$ 24,000.00	\$3,630.00 \$3,630.00	\$3,630.00 \$3,630.00	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Housing Authority of the City of Shreveport					<b>Federal FFY of Grant: 2009</b>
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-WIDE					
Operations	09-30-2010				
Mgmt. Improvement	09-30-2010				
Administration	09-30-2010				
Audit Cost	09-30-2010				
Planning Cost	09-30-2010				
Site Improvements	09-30-2010				
Dwelling Structures	09-30-2010				
Dwelling Equipment	09-30-2010				
PHA-WIDE					
Non-Dwelling Structures	09-30-2010				
HA-WIDE					
Non-Dwelling Equipment	09-30-2010				
Relocation LA 2-3, 9 & 10	09-30-2010				
Development Activities	09-30-2010				

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

[illegible]

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Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>					
<b>PHA Name:</b> Housing Authority of the City of Shreveport		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P002501-10 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: FY 2010</b> <b>FFY of Grant Approval: 2010</b>
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:1 ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 4/30/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	\$100,000.00	\$65,000	\$65,000	
3	1408 Management Improvements	\$200,000.00	\$ 200,000		
4	1410 Administration (may not exceed 10% of line 21)	\$100,000.00	\$80,000		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$70,000.00	\$70,000		
8	1440 Site Acquisition				
9	1450 Site Improvement	\$158,278.00			
10	1460 Dwelling Structures	\$322,081.00	\$549,197	\$549,197	
11	1465.1 Dwelling Equipment—Nonexpendable	\$124,676.00			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$140,000.00	\$140,000		
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.



Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

<b>Part I: Summary</b>					
<b>PHA Name:</b> <b>Housing Authority</b> <b>of the City of</b> <b>Shreveport</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P002501-10 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:FFY 2010</b> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:        ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 4/30/11 <input type="checkbox"/> Final Performance and Evaluation Report					
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost <sup>1</sup></b>	
		<b>Original</b>	<b>Revised <sup>2</sup></b>	<b>Obligated</b>	<b>Expended</b>
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,104,197.00	\$1,104,197.00		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Shreveport		Grant Type and Number Capital Fund Program Grant No: LA48P002501-10 CFPP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: FY 2010			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA-WIDE	Total Operations	1406		\$100,000.00	\$65,000	\$65,000		
LA 2-2	Extend Physical Security Program	1408		\$ 20,000.00	\$50,000			
HA-WIDE	Staff & Resident Training	1408		\$180,000.00	\$35,000			
	Purchased Upgrade Computer System	1408			\$57,000			
	Perform Energy Audit	1408						
	Perform Physical Needs Assessment	1408						
	Perform UPCS Inspections	1408			\$8,000			
	HOPE VI/Choice Neighborhood Appl.	1408		\$50,000	\$50,000	\$50,000		
	TOTAL	1408		\$200,000.00	\$200,000			
HA-WIDE	a. CFP Staff Salaries	1410		\$ 68,000.00	\$60,000			
	b. CFP Staff Benefits	1410		\$ 30,000.00	\$20,000			
	c. CFP	1410		\$ 1,000.00				
	d. CFP Sundry Cost	1410		\$ 1,000.00				
	TOTAL	1410		\$100,000.00	\$80,000			
HA-WIDE	Architect/Engineer Services	1430		\$70,000.00	\$70,000			
	TOTAL			\$70,000.00	\$70,000			

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Shreveport		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P002501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: FFY 2010</b>			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA-WIDE	Tree Trimming & Removal	1450		\$158,278.00				
	Correct Drainage Problems							
	Lawn Service							
	Replace Sidewalks							
	Paint & Strip Parking Areas							
	TOTAL	1450		\$158,278.00				
		1460						
LA 2-4	Refinish Ceilings & Paint in 100 units	1460		\$211,831.00				
	TOTAL	1460		\$211,831.00				
HA-WIDE	Replace outdated stoves, refrigerators	1465		\$124,676.00				
	and water heaters							
	TOTAL	1465		\$124,676.00				
HA-WIDE	Purchase 7 Maintenance Trucks	1475			\$140,000			

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Housing Authority of the City of Shreveport				<b>Federal FFY of Grant: FFY 2010</b>	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-WIDE	09-30-2011				
1406 Operations	09-30-2011				
1408 Mgmt. Improvements	09-30-2011				
1410 Administration	09-30-2011				
1430 A & E Services	09-30-2011				
1450 Site Improvements	09-30-2011				
1465 Dwelling Equipment	09-30-2011				
1475 Non-Dwelling Equip.	09-30-2011				

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Housing Authority of the City of Shreveport				<b>Federal FFY of Grant:</b>	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
1460 LA 2-2	09-30-2011				
1460 LA 2-4	09-30-2011				

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>					
<b>PHA Name:</b> Housing Authority of the City of Shreveport		<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: LA48R002501-09 Date of CFFP:			<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval:</b>
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:      ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 04/30/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$277,933.00	\$337,933.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>	\$100,000.00			

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

<b>Part I: Summary</b>					
<b>PHA Name:</b> <b>Housing Authority</b> <b>of the City of</b> <b>Shreveport</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: LA48R002501-09 Date of CFFP:	<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval:</b>			
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:        ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/10 <input type="checkbox"/> Final Performance and Evaluation Report					
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost <sup>1</sup></b>	
		<b>Original</b>	<b>Revised <sup>2</sup></b>	<b>Obligated</b>	<b>Expended</b>
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$337,933.00	\$337,933.00	\$0.00	\$0.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	\$377,933.00			
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Shreveport		Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: LA48R002501-09			Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA-WIDE	Development Construction of replacement units	1460			\$377,933.00	\$0.00	\$0.00	
	Total				\$377,933.00			

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.



[illegible]

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

[illegible]

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Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>					
<b>PHA Name:</b> Housing Authority of the City of Shreveport		<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: LA48R002501-10 Date of CFFP:			<b>FFY of Grant: FY2010</b> <b>FFY of Grant Approval:</b>
<b>Type of Grant</b> <input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:                      )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>	\$ 383,107.00			

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

<b>Part I: Summary</b>					
<b>PHA Name:</b> <b>Housing Authority</b> <b>of the City of</b> <b>Shreveport</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: LA48R002501-10 Date of CFFP:			<b>FFY of Grant:FFY 2010</b> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:        ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 4/30/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$383,107.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

[illegible]

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.



[illegible]

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Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>					
<b>PHA Name:</b> Housing Authority of the City of Shreveport		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48S002501-09 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval:</b>
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 4/30/11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$ 93,000.00	\$ 77,840.50	\$ 77,990.50	\$ 22,373.34
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 50,000.00	\$ 149,143.13	\$ 149,143.13	\$117,107.63
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$1,307,579.00	\$1,370,130.00	\$1,370,130.00	\$821,389.50
11	1465.1 Dwelling Equipment—Nonexpendable	\$ 108,750.00	\$ 76,524.00	\$ 76,374.00	\$76,374.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment		\$ 14,131.37	\$ 14,131.37	\$14,131.37
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	\$ 80,850.00	\$ 57,410.00	\$ 57,410.00	\$20,462.05
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

<b>Part I: Summary</b>					
<b>PHA Name:</b> <b>Housing Authority</b> <b>of the City of</b> <b>Shreveport</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48S002501-09 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval:</b>			
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:        ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/10 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,745,179.00	\$1,745,179.00	\$1,745,179.00	\$1,071,837.89
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Shreveport		Grant Type and Number Capital Fund Program Grant No: LA48S002501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA-WIDE	a. CFP Full-time & Prorata Staff Salaries	1410.1		\$60,000.00	\$50,893.67	\$51,043.67	\$ 0.0	
Administration	. CFP Full-time & Prorata Staff	1410.9		\$30,000.00	\$ 25,446.83	\$ 25,446.83	\$ 0.00	
	Benefits & Contributions							
	c. CFP Staff travel during Mod	1410.10		\$ 1,000.00	\$ 500.00	\$ 500.00	\$ 0.00	
	d. CFP Publication & Reproduction	1410.12		\$ 1,000.00	\$ 500.00	\$ 500.00	0.00	
	e. CFP Sundry Cost	1410.9		\$ 1,000.00	\$ 500.00	\$ 500.00	\$ 0.00	
	TOTAL	1410		\$93,000.00	\$ 77,840.50	\$ 77,840.50	\$ 0.00	
A & E Fee	a. Planning & Contract Admin Fee	1430		\$50,000.00	\$149,143.13	\$ 149,143.13	\$ 117,107.63	
	TOTAL	1430		\$50,000.00	\$149,143.13	\$ 149,143.13	117,107.63	
Dwelling Structure LA 2-2	a. Inspection, Testing, Removal and Remediation of Mold and Mildew minor mod at LA 2-2	1460		\$1,407,579	\$1,337,279	\$1,370,130.00	\$821,389.50	
	TOTAL	1460		\$1,407,579	\$1,337,279	\$1,370,130.00	\$821,389.50	
	Total							

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Shreveport			<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48S002501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA-WIDE	a. Replacement of ranges	1465		\$ 45,000	\$ 34,424	\$31,313.34	\$31,313.34	Complete
	b. Replacement of refrigerators	1465		\$ 63,759	\$ 42,100	\$45,060.66	\$45,060.66	Complete
	TOTAL	1465		\$1,407,579	\$ 76,524	\$76,374.00	\$76,374.00	
HA-WIDE	Non-Dwelling Equipment	1475			\$14,131.37	\$14,131.37	\$14,131.37	Complete
NON-DWELLING EQUIPMENT	TOTAL	1475			\$14,131.37	\$14,131.37	\$14,131.37	
Relocation Cost	a. Relocation of residents	1495		\$ 66,150	\$42,200.00	\$ 42,200.00	\$ 0.00	
LA 2-2	b. Payment of transfer fees	1495		\$ 0.00	\$15,210.00	\$15,210.00	\$ 0.00	
	one-way move							
	TOTAL	1495		\$ 66,150	\$ 57,410	\$57,410.00	\$ 0.00	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Housing Authority of the City of Shreveport					<b>Federal FFY of Grant: 2009</b>
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA WIDE	12-31-2009				
Administration					
LA 2-2 Fees and Cost	12-31-2009				
LA 2-2 Dwelling Units	12-31-2009				
PHA WIDE 1465	12-31-2009				
LA 2-2 1495	12-31-2009				

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

[illegible]

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Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	<b>Overall</b>	Affordability	Supply	Quality	Accessibility	Size	Location
Income <= 30% of AMI	13,263	5	5	3	1	4	4
Income >30% but <=50% of AMI	8,827	5	4	3	1	3	3
Income >50% but <80% of AMI	11,108	2	1	2	1	3	2
Elderly	4,368	5	5	N/A	3	2	2
Families with Disabilities	18,552	5	5	5	3	3	3
Race/Ethnicity <b>Black/Non Hisp.</b>	28,655	4	3	3	1	N/A	4
Race/Ethnicity <b>White/Non Hisp</b>	107,824	1	1	1	1	N/A	1
Race/Ethnicity <b>American Indian/Eskimo</b>	463	4	3	3	1	N/A	3
Race/Ethnicity <b>Other</b>	1,271	2	2	3	1	N/A	1

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☒ Consolidated Plan of the Jurisdiction/s : **City of Shreveport**  
Indicate year: **2009 - 2013**
- ☒ U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset  
(based on 2000 Census)



### Housing Needs of Families on the Waiting List

Waiting list type: As of

- ☐ Section 8 tenant-based assistance  
☒ Public Housing  
☐ Combined Section 8 and Public Housing  
☐ Public Housing Site-Based or sub-jurisdictional waiting list (optional)  
 If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	384		188
Extremely low income <=30% AMI	184	61%	
Very low income (>30% but <=50% AMI)	108	36%	
Low income (>50% but <80% AMI)	12	4%	
Families with children	289	95%	
Elderly families	15	.05%	
Families with Disabilities	24	.08%	
Race/ethnicity <b>Black Non-Hisp.</b>	286	94%	
Race/ethnicity <b>White Non-Hisp.</b>	18	.06%	
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	99	37%	21
2 BR	102	43%	52
3 BR	88	19%	110
4 BR	15	1%	5
5 BR			
5+ BR			

Housing Needs of Families on the Waiting List			
Waiting list type: As of (3 April 2007)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance <input type="checkbox"/> Public Housing <input type="checkbox"/> Combined Section 8 and Public Housing <input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	1,341		
Extremely low income <=30% AMI	Not available	Not available	
Very low income (>30% but <=50% AMI)	Not available	Not available	
Low income (>50% but <80% AMI)	Not available	Not available	
Families with children	Not available	Not available	
Elderly families	15	.002%	
Families with Disabilities	45	.02%	
Race/ethnicity <b>Black-Non Hisp.</b>	1347	98%	
Race/ethnicity <b>White Non-Hisp.</b>	26	.03%	
Race/ethnicity <b>Unknown</b>			
Race/ethnicity – Hispanic			

### (1) Strategies

**Need: Shortage of affordable housing for all eligible populations**

**Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:**

Select all that apply

- ☒ Employ effective maintenance and management policies to minimize the number of public housing units off-line
- ☒ Reduce turnover time for vacated public housing units. The Authority will be implementing a new policy whereas maintenance personnel will be assigned to each property and responsible to the site manager.

- ☒ Reduce time to renovate public housing units. Employing site maintenance personnel should reduce travel time to and from site, thereby, allowing for reduced turnover time.
- ☒ Seek replacement of public housing units lost to the inventory through mixed finance development
- ☒ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- ☒ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- ☒ Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- ☒ Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program. The Authority has initiated an aggressive outreach program to increase the number of landlords and participants in the Section 8 Program. Such is implemented to increase the utilization of Section 8 Housing Choice Vouchers.
- ☒ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies. The Authority's staff and local community will participate in the consolidated planning process and ensure the planned activities are included in the City of Shreveport's Consolidated Plan.
- ☒ Other (list below)  
Seek the development of housing units through mixed finance (i.e. CDBG, Home, LIHTC, Capital Fund Bonding, Conventional Loans, Reserves, etc.)

## **Strategy 2: Increase the number of affordable housing units by:**

Select all that apply

- ☒ Apply for additional section 8 units should they become available
- ☒ Leverage affordable housing resources in the community through the creation of mixed - finance housing.
- ☒ Pursue housing resources other than public housing or Section 8 tenant-based assistance. Revitalization of Naomi D. Jackson Heights to secure various funding sources: CDBG, HOME, LIHTC, Tax Exempt Bond, etc.
- ☒ Other: (list below)

**Public Housing Homeownership replacement housing units**

**Mixed financed housing units**

**Low Income Housing Tax Credits**

# **Housing Authority of the City of Shreveport**

## **VIOLENCE AGAINST WOMEN ACT (VAWA) POLICY**

### **I. Purpose and Applicability**

The purpose of this policy (herein called “Policy”) is to implement the applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) and more generally to set forth HACS’s policies and procedures regarding domestic violence, dating violence, and stalking, as hereinafter defined.

This Policy shall be applicable to the administration by HACS of all federally subsidized public housing and Section 8 rental assistance under the United States Housing Act of 1937 (42 U.S.C. §1437 *et seq.*). Notwithstanding its title, this policy is gender-neutral, and its protections are available to males who are victims of domestic violence, dating violence, or stalking as well as female victims of such violence.

### **II. Goals and Objectives**

This Policy has the following principal goals and objectives:

- A. Maintaining compliance with all applicable legal requirements imposed by VAWA;
- B. Ensuring the physical safety of victims of actual or threatened domestic violence, dating violence, or stalking who are assisted by HACS;
- C. Providing and maintaining housing opportunities for victims of domestic violence dating violence, or stalking;
- D. Creating and maintaining collaborative arrangements between HACS, law enforcement authorities, victim service providers, and others to promote the safety and well-being of victims of actual and threatened domestic violence, dating violence and stalking, who are assisted by HACS; and
- E. Taking appropriate action in response to an incident or incidents of domestic violence, dating violence, or stalking, affecting individuals assisted by HACS.

### **III. Other AHA Policies and Procedures**

This Policy shall be referenced in and will be attached to HACS’s Five-Year Public Housing Agency Plan and shall be incorporated in and made a part of HACS’s Admissions and Continued Occupancy Policy. HACS’s annual public housing agency plan shall also contain information concerning AHA’s activities, services or programs relating to domestic violence, dating violence, and stalking.

To the extent any provision of this policy shall vary or contradict any previously adopted policy or procedure of HACS, the provisions of this Policy shall prevail.

#### **IV. Definitions**

As used in this Policy:

A. *Domestic Violence* – The term ‘domestic violence’ includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabiting with or has cohabited with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person’s acts under the domestic or family violence laws of the jurisdiction.”

B. *Dating Violence* – means violence committed by a person—

- (A) who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- (B) where the existence of such a relationship shall be determined based on a consideration of the following factors:
  - (i) The length of the relationship.
  - (ii) The type of relationship.
  - (iii) The frequency of interaction between the persons involved in the relationship.

C. *Stalking* – means –

- (A) (i) to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person; and (ii) to place under surveillance with the intent to kill, injure, harass or intimidate another person; and
- (B) in the course of, or as a result of, such following, pursuit, surveillance or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to –
  - (i) that person;
  - (ii) a member of the immediate family of that person; or
  - (iii) the spouse or intimate partner of that person;

D. *Immediate Family Member* - means, with respect to a person –

- (A) a spouse, parent, brother, sister, or child of that person, or an individual to whom that person stands in loco parentis; or
- (B) any other person living in the household of that person and related to that person by blood or marriage.

E. *Perpetrator* – means person who commits an act of domestic violence, dating violence or stalking against a victim.

## **V. Admissions and Screening**

A. *Non-Denial of Assistance.* HACS will not deny admission to public housing or to the Section 8 rental assistance program to any person because that person is or has been a victim of domestic violence, dating violence, or stalking, provided that such person is otherwise qualified for such admission.

B. *Mitigation of Disqualifying Information.* When so requested in writing by an applicant for assistance whose history includes incidents in which the applicant was a victim of domestic violence, HACS, may but shall not be obligated to, take such information into account in mitigation of potentially disqualifying information, such as poor credit history or previous damage to a dwelling. If requested by an applicant to take such mitigating information into account, HACS shall be entitled to conduct such inquiries as are reasonably necessary to verify the claimed history of domestic violence and its probable relevance to the potentially disqualifying information. HACS will not disregard or mitigate potentially disqualifying information if the applicant household includes a perpetrator of a previous incident or incidents of domestic violence.

## **VI. Termination of Tenancy or Assistance**

A. *VAWA Protections.* Under VAWA, public housing residents and persons assisted under the Section 8 rental assistance program have the following specific protections, which will be observed by HACS:

1. An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be considered to be a “serious or repeated” violation of the lease by the victim or threatened victim of that violence and will not be good cause for terminating the tenancy or occupancy rights of or assistance to the victim of that violence.
2. In addition to the foregoing, tenancy or assistance will not be terminated by HACS as a result of criminal activity, if that criminal activity is directly related to domestic violence, dating violence or stalking engaged in by a member of the assisted household, a guest or another person under the tenant’s control, and the tenant or an immediate family member is the victim or threatened victim of this criminal activity. However, the protection against termination of tenancy or assistance described in this paragraph is subject to the following limitations:
  - (a) Nothing contained in this paragraph shall limit any otherwise available authority of HACS or a Section 8 owner or manager to terminate tenancy, evict, or to terminate assistance, as the case may be, for any violation of a lease or program requirement not premised on the act or acts of domestic violence, dating violence, or stalking in question against the tenant or a member of the tenant’s household. However, in taking any such action, neither HACS nor a Section 8 manager or owner may apply a more demanding standard to the victim of domestic violence dating violence or stalking than that applied to other tenants.

- (b) Nothing contained in this paragraph shall be construed to limit the authority of HACS or a Section 8 owner or manager to evict or terminate from assistance any tenant or lawful applicant if the owner, manager or HATT, as the case may be, can demonstrate an actual and imminent threat to other tenants or to those employed at or providing service to the property, if the tenant is not evicted or terminated from assistance.

B. *Removal of Perpetrator.* Further, notwithstanding anything in paragraph VI.A.2. or Federal, State or local law to the contrary, HACS or a Section 8 owner or manager, as the case may be, may bifurcate a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to a lease, in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in acts of physical violence against family members or others. Such action against the perpetrator of such physical violence may be taken without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also the tenant or a lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by law applicable to terminations of tenancy and evictions by HACS. Leases used for all public housing operated by HACS and, at the option of Section 8 owners or managers, leases for dwelling units occupied by families assisted with Section 8 rental assistance administered by HACS, shall contain provisions setting forth the substance of this paragraph.

## **VII. Verification of Domestic Violence, Dating Violence or Stalking**

A. *Requirement for Verification.* The law allows, but does not require, HACS or a section 8 owner or manager to verify that an incident or incidents of actual or threatened domestic violence, dating violence, or stalking claimed by a tenant or other lawful occupant is bona fide and meets the requirements of the applicable definitions set forth in this policy. Subject only to waiver as provided in paragraph VII. C., HACS shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by HACS. Section 8 owners or managers receiving rental assistance administered by HACS may elect to require verification, or not to require it as permitted under applicable law.

Verification of a claimed incident or incidents of actual or threatened domestic violence, dating violence or stalking may be accomplished in one of the following three ways:

1. *HUD-approved form* - by providing to HACS or to the requesting Section 8 owner or manager a written certification, on a form approved by the U.S. Department of Housing and Urban Development (HUD), that the individual is a victim of domestic violence, dating violence or stalking that the incident or incidents in question are bona fide incidents of actual or threatened abuse meeting the requirements of the applicable definition(s) set forth in this policy. The incident or incidents in question must be described in reasonable detail as required in the HUD-approved form, and the completed certification must include the name of the perpetrator.
2. *Other documentation* - by providing to HACS or to the requesting Section 8 owner or manager documentation signed by an employee, agent, or volunteer of a victim service

provider, an attorney, or a medical professional, from whom the victim has sought assistance in addressing the domestic violence, dating violence or stalking, or the effects of the abuse, described in such documentation. The professional providing the documentation must sign and attest under penalty of perjury (28 U.S.C. 1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse meeting the requirements of the applicable definition(s) set forth in this policy. The victim of the incident or incidents of domestic violence, dating violence or stalking described in the documentation must also sign and attest to the documentation under penalty of perjury.

3. *Police or court record* – by providing to HACS or to the requesting Section 8 owner or manager a Federal, State, tribal, territorial, or local police or court record describing the incident or incidents in question.

B. *Time allowed to provide verification/ failure to provide.* An individual who claims protection against adverse action based on an incident or incidents of actual or threatened domestic violence, dating violence or stalking, and who is requested by HACS, or a Section 8 owner or manager to provide verification, must provide such verification within 14 business days (*i.e.*, 14 calendar days, excluding Saturdays, Sundays, and federally-recognized holidays) after receipt of the request for verification. Failure to provide verification, in proper form within such time will result in loss of protection under VAWA and this policy against a proposed adverse action.

C. *Waiver of verification requirement.* The Executive Director of HACS, or a Section 8 owner or manager, may, with respect to any specific case, waive the above-stated requirements for verification and provide the benefits of this policy based on the victim's statement or other corroborating evidence. Such waiver may be granted in the sole discretion of the Executive Director, owner or manager. Any such waiver must be in writing. Waiver in a particular instance or instances shall not operate as precedent for, or create any right to, waiver in any other case or cases, regardless of similarity in circumstances.

## **VIII. Confidentiality**

A. *Right of confidentiality.* All information (including the fact that an individual is a victim of domestic violence, dating violence or stalking) provided to HACS or to a Section 8 owner or manager in connection with a verification required under section VII of this policy or provided in lieu of such verification where a waiver of verification is granted, shall be retained by the receiving party in confidence and shall neither be entered in any shared database nor provided to any related entity, except where disclosure is:

1. requested or consented to by the individual in writing, or
2. required for use in a public housing eviction proceeding or in connection with termination of Section 8 assistance, as permitted in VAWA, or
3. otherwise required by applicable law.

B. *Notification of rights.* All tenants of public housing and tenants participating in the Section 8 rental assistance program administered by HACS shall be notified in writing concerning their right to confidentiality and the limits on such rights to confidentiality.



## **VIII. Transfer to New Residence**

- A. *Application for transfer.* In situations that involve significant risk of violent harm to an individual as a result of previous incidents or threats of domestic violence, dating violence, or stalking, HACS will, if an approved unit size is available at a location that may reduce the risk of harm, approve transfer by a public housing or Section 8 tenant to a different unit in order to reduce the level of risk to the individual. A tenant who requests transfer must attest in such application that the requested transfer is necessary to protect the health or safety of the tenant or another member of the household who is or was the victim of domestic violence dating violence or stalking and who reasonably believes that the tenant or other household member will be imminently threatened by harm from further violence if the individual remains in the present dwelling unit.
- B. *Action on applications.* HACS will act upon such an application promptly, within seven business days.
- C. *No right to transfer.* HACS will make every effort to accommodate requests for transfer when suitable alternative vacant units are available and the circumstances warrant such action. However, except with respect to portability of Section 8 assistance as provided in paragraph IX. E. below the decision to grant or refuse to grant a transfer shall lie within the sole discretion of HACS, and this policy does not create any right on the part of any applicant to be granted a transfer.
- D. *Family rent obligations.* If a family occupying HACS public housing moves before the expiration of the lease term in order to protect the health or safety of a household member, the family will remain liable for the rent during the remainder of the lease term unless released by HACS. In cases where HACS determines that the family's decision to move was reasonable under the circumstances, HACS may wholly or partially waive rent payments and any rent owed shall be reduced by the amounts of rent collected for the remaining lease term from a tenant subsequently occupying the unit.
- E. *Portability.* Notwithstanding the foregoing, a Section 8-assisted tenant will not be denied portability to a unit located in another jurisdiction (notwithstanding the term of the tenant's existing lease has not expired, or the family has not occupied the unit for 12 months) so long as the tenant has complied with all other requirements of the Section 8 program and has moved from the unit in order to protect a health or safety of an individual member of the household who is or has been the victim of domestic violence dating violence or stalking and who reasonably believes that the tenant or other household member will be imminently threatened by harm from further violence if the individual remains in the present dwelling unit.

## **X. Court Orders/Family Break-up**

A. *Court orders.* It is HACS's policy to honor orders entered by courts of competent jurisdiction affecting individuals assisted by HATT and their property. This includes cooperating with law enforcement authorities to enforce civil protection orders issued for the protection of victims and addressing the distribution of personal property among household members in cases where a family breaks up.

B. *Family break-up.* Other HACS policies regarding family break-up are contained in HACS's Public Housing Admissions and Continuing Occupancy Plan (ACOP) and its Section 8 Administrative Plan.

## **XI. Relationships with Service Providers**

It is the policy of HACS to cooperate with organizations and entities, both private and governmental, that provide shelter and/or services to victims of domestic violence. If HACS staff become aware that an individual assisted by HACS is a victim of domestic violence, dating violence or stalking, HACS will refer the victim to such providers of shelter or services as appropriate. Notwithstanding the foregoing, this Policy does not create any legal obligation requiring HACS either to maintain a relationship with any particular provider of shelter or services to victims of domestic violence or to make a referral in any particular case. HACS's annual public housing agency plan shall describe providers of shelter or services to victims of domestic violence with which HACS has referral or other cooperative relationships.

## **XII. Notification**

HACS shall provide written notification to applicants, tenants, and Section 8 owners and managers, concerning the rights and obligations created under VAWA relating to confidentiality, denial of assistance and, termination of tenancy or assistance.

## **XIII. Relationship with Other Applicable Laws**

Neither VAWA nor this Policy implementing it shall preempt or supersede any provision of Federal, State or local law that provides greater protection than that provided under VAWA for victims of domestic violence, dating violence or stalking.

## **XIV. Amendment**

This policy may be amended from time to time by HACS as approved by the HACS Board of Commissioners.

**HOUSING AUTHORITY OF THE CITY OF SHREVEPORT  
(AUTHORITY)  
2500 LINE AVENUE  
SHREVEPORT, LOUISIANA 71104**

**COMMUNITY SERVICES PROGRAM  
POLICY AND PROCEDURES**

## TABLE OF CONTENT

### SUBJECT

- I. Effective Date
- II. Policy Statement
- III. Applicability
- IV. Background
- V. How the community service and self-sufficiency programs will be

Implemented?

VI. Attachments

I. EFFECTIVE DATE

The effective date of this policy shall be October 1, 2003 as mandated by

The United States of America Congress Quality Housing Work Responsibility Act (QWHRA) of 1998.

II. POLICY STATEMENT

The Purpose and or objectives of the policy are:

- A. To define and establish the how the community service and economic self-sufficiency programs will be administered to the residents.

- B. To set forth the Authority's expectations of the personnel who is responsible for administering, and of the residents, for whom the program is geared to effect, by providing guidelines, and documents for appropriate use.**

### **III.     APPLICABILITY**

**This policy applies to all staff member and residents who are in direct relations with the community service program.**

### **IV. Background**

#### **COMMUNITY SERVICES**

Community Service and Economic Self-Sufficiency provisions are intended to assist adult residents in improving their own and their neighbors' economic and their social well-being, and give residents a greater stake in their communities.

The provision requires performing at least 8 hours of volunteer services, participating in economic self-sufficiency programs, or performing a combination of both each month.

The term community service is defined in 24CFR960.601 as the performance of voluntary work or duties that are a public benefit, and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self-

responsibility in the community. Community service is not employment and may not include political activities. Community service or self-sufficiency activities performed by residents must not be substituted for work ordinary performed by Housing Authority employees, or replace a job at any location where residents perform a activities to satisfy the service requirement (24 CFR 960-609).

- Community Service participants serve low-income communities and families across the country. Participants of community service work and live in the communities they serve, creating or expanding programs that can continue after they complete their service. Community service participants are assigned to local project sponsors and focus on building community capacity, mobilizing community resources, and increasing self-reliance.
  - Community Service participants participates in local service programs operated by not-for-profit organizations, local and state governmental entities, Indian tribes, territories, institutions of higher education, local school and police districts, and partnerships among any of the above. Participants serving in these programs help meet communities' critical education, public safety, environmental, and other human needs.
  - Community Service is an 8-hour, residential program operated directly by the Housing Authority of the City of Shreveport (Authority). A service-learning approach that is integrated throughout all service projects includes planned activities and training.
1. Getting Things Done through direct and demonstrable service that helps solve community problems in the areas of education, public safety, environment and other human needs.
  2. Strengthening Communities by bringing together individuals of all ages and backgrounds in the common effort to improve our communities.
  3. Encouraging Responsibility by enabling participants to explore and exercise the responsibilities toward their communities, their families, and themselves.
  4. Expanding Opportunity by enhancing participants educational opportunities, job experience, and life skills.

## **ECONOMIC SELF-SUFFICIENCY**

Economic self-sufficiency program is defined in 24 CFR 5.603 as any program “designed to encourage, assist, train, or facilitate the economic independence of HUD-assisted families or to provide work for such families. “These programs include job training, employment counseling, work placement, basic skills training, education, English proficiency, workfare, financial or household management, apprenticeship, and any programs necessary to ready a participant for work (including a substance abuse or mental health program) or other work activities.

## **V. How will the Community Service and Self-Sufficiency Provision be implemented?**

### **HA Responsibilities**

#### **I. COMMUNITY SERVICE REQUIREMENT IN PUBLIC HOUSING LEASE**

##### **A. DWELLING LEASE AGREEMENTS**

On or after the effective date of the Housing Authority Community Service Program Policy, the community service requirement will be included in the Housing Authority of the City of Shreveport (Authority) Dwelling Lease Agreement as a provision of the lease. The Central Processing Department will identify residents who are not exempt from the community service requirement.

At least 90 days prior to the annual renewal of a family’s lease, the Public Housing Manager (PHM) shall submit to the Resident Service Office Coordinator (RSC) and Case Managers (CM) a status report on whether participants of the family are exempt from, or in compliance with the community service requirements. The RSC and CM will provide the Authority’s Community Service Program Director, on a monthly basis, a current list of residents who are subject to this requirement and whether they are in compliance.

During annual re-examination, the PHM will utilize the compliance information received from the RSC and CM in its review to determine whether the family’s lease will be renewed. Any non-exempt family participant not in compliance will be contacted by PHM and requested to sign a Compliance Agreement/Make-Up Agreement prior to lease renewal. The Compliance Agreement/Make-UP Agreement shall stipulate that the resident will satisfy all community service hours within the next



twelve months. The PHM shall retain, and properly file the original agreement. Copies of the agreement shall be forwarded to the family's head of household, the resident (if not head of household), and the RSC and CM, who will monitor compliance with the agreement.

Should any non-compliant family participant fail to accept the terms of the agreement, to fulfill his/her obligation under the agreement, or otherwise breach the terms of the agreement, the PHM shall take any and all necessary action to terminate the lease.

If, during the course of annual re-examination, a family participant is found to have violated a signed Compliance Agreement/Make-UP, then the family's lease will not be renewed unless the non-compliant family participant is no longer a part of the household.

## **B. NOTIFICATION TO RESIDENTS OF COMMUNITY SERVICE PROGRAM**

Prior to annual re-examination, the Community Service Department will send written notification to each resident advising him or her of the community service requirement. Said notification shall describe the eight-hour per month requirement, exemptions, and the consequences of failure to comply with the requirement. The notification shall further advise families that their community service obligation will begin on the date of their first annual reexamination or after the effective date of this policy. It will further advise them that failure to comply with the community service requirement will result in ineligibility for continued occupancy at the time of any subsequent annual reexamination. In addition, the notification shall advise the residents of their rights to claim an exempt status.

## **C. NOTICE TO RESIDENTS OF REQUIREMENTS TO PARTICIPATE**

Those who are determined to be non-exempt will be notified at move-in and or re-certification. Residents who dispute that they are required to participate shall be afforded a reasonable opportunity to produce proper documentation to support their claim of exemption. Failure to provide sufficient documentation refuting the original determination will uphold the original status, thereby, maintaining that resident's status as non-exempt. The documentation should be submitted to the RSC and CM.

The RSC and CM shall examine all documents submitted by the resident(s) disputing their non-exempt status and, whenever necessary, contact the appropriate employer or agency to obtain further verification. Residents

shall be notified in writing of this determination. Residents who are determined by the RSC and PHM to be non-exempt at this stage may appeal to the Authority's Community Services Coordinator within 10 days for a second review. The Community Service Coordinator shall review these documents originally submitted to the RSC and PHM and respond within 15 days with final determination.

Residents who are required to participate (non-exempt residents) shall execute a "Participation Agreement" with the RSC and PHM for file. This agreement shall stipulate the general terms and conditions of the Community Service Program, as well as the rights and privileges of the resident who enters into the agreement. It should be noted that exempt residents, though not required may participate in the Economic Self-Sufficiency segment of the Community Service Program.

## **II. COMMUNITY SERVICE AND ECONOMIC SELF-SUFFICIENCY PLAN**

### **A. ORIENTATION/SKILLS ASSESSMENT**

Upon execution of the Participation Agreement, participants will undergo an orientation with the Case Manager that will set forth the general requirements and options available in the satisfying the requisite 8 hours per month (non-cumulative). Basic Skills Assessments will be conducted with each participant in an effort to determine which program path best suits each individual. Participants are given the first option of choosing their community service placement. If participant request or ever becomes non-compliant, the case manager will assign the placement.

Participants shall receive credit hours for attending the orientation and completing the skills assessment in satisfaction of the Community Service Program requirement.

### **B. PLACEMENT**

At the participant's request and for non-compliance placement services will be provided that are directly related, as determined by the skills assessment, to the enhancement of their personal and /or professional skills. For example, a participant who reads at a low literacy level will be offered Adult Literacy Training. Similarly, Job Readiness Training will be offered to those who are about to enter into the workforce, while those who may need skills training will be placed into a training program that will

lead to a marketable skill. The goal is to provide participants with the tools necessary to secure employment.

Participants who elect the community service component will undergo a special orientation on volunteering. The purpose of this orientation is to fully explain to the participants the expectations of participating agencies, as well as the procedures for reporting completed hours of service. Participants will also complete a Community Service Interest Form. This will assist in pairing participants with agencies that provide goods or services that fall within each individual participant's scope of interest.

After completing the skills assessment orientation and the community service interest forms, participants will be ready for community service placement. The coordinator will negotiate a Memoranda of Understanding between participating agencies and the Authority. The coordinator and case managers will also monitor the participant's progress and address any issues or problems that may arise during the course of his or her placement. The placement agencies will verify attendance and hours of community service performed.

### **C. PROCEDURE FOR CHANCE IN STATUS/ NEW TENANCY**

Residents will be notified of the community service program requirements when the following conditions occur. This will enable continued monitoring of the objectives of the program to ensure compliance. The following outlines the reciprocal duties of the PHM and the CM in the event there is a change in resident status or tenancy.

1. When a resident's community service status has changed: This may occur when a resident who was previously exempt from the community service requirement is no longer exempt (e.g., change in work status), or when a resident who was previously required to comply with this requirement becomes exempt. The PHM, when notified or otherwise informed of such changes shall notify the case managers. Likewise, the case managers, when notified or otherwise informed of such changes, shall notify the PHM. If there is a dispute, the coordinator will determine whether the resident's status under this policy has been affected.

- a. Residents who move from exempt to nonexempt status shall receive written notification from the case managers of such change, the ways in which the requirement may be fulfilled, and the consequences of noncompliance. The resident

will be placed on the list of mandatory community service participants that the Authority and case managers shall maintain.

2. When new residents move into public housing or when there are additions/deletions to the lease, under such circumstances, the PHM will screen to determine exempt or nonexempt status and shall forward the names of the new resident to the case managers who will conduct orientation and skills assessment.

#### **D. NOTIFICATION OF NON-COMPLIANCE**

The CM shall issue the first notice of noncompliance to any family determined to be in noncompliance of the community service requirement. The notice will advise families of their rights to dispute such determination, the established grievance procedure, and the Authority's intent to terminate the lease unless the family participant(s) enter into a Compliance Agreement/Make-Up Agreement at or before the re-certification.

#### **E. OPPORTUNITY TO CURE NON-COMPLIANCE**

The Authority shall offer the family participants(s) the opportunity to enter into a Compliance Agreement prior to the anniversary date of the lease. The agreement shall state that the family member agrees to enter into an economic self-sufficiency program, or contribute to community service for as many hours as needed to comply with this requirement during the period in question.

The opportunity to cure non-compliance shall occur within the twelve-month period in question beginning on the date the Compliance Agreement is executed. In the event that the "cure period" and new twelve-month period run concurrently, community service or self-sufficiency hours accumulated shall count toward the delinquent hours only. At no time will a resident be allowed to "double count" community service hours.

The case managers and coordinator shall assist the non-compliance resident with identifying acceptable community service and/or economic self-sufficiency activities. Placement assistance will be provided based on skill level and proximity, at the CM direction, not the participants. The CM will track compliance on a monthly basis.

If any family member fails to accept the terms of the agreement, does not fulfill his/her obligation to participate in either a community service or an

economic self-sufficiency program, or falls behind in their obligation under the agreement to perform the requisite community service hours; the Authority shall take action to terminate the lease.

## PROGRAM MANAGEMENT

### Participant Orientation

Participant orientation is critical for preparing participants to begin their terms of service. In order to facilitate participants learning and retaining this vital knowledge, it is strongly encouraged that materials are presented in multiple formats. In particular, program rules, including prohibited activities, should be presented orally as well as in writing, with opportunities for discussions and questions.

### Community Service: The Big Picture

- The importance of getting things done
- The meaning of community
- The doors of opportunity that will open through service
- The responsibilities that individuals have to themselves, their families, their community, and their nation

### Program Rules and Regulation

- Drug Free Workplace Act
- Sexual harassment and other discrimination issues
- Grievance procedure
- Safety protocol
- Prohibited activities
- Rules of Conduct
- Making up missed service hours
- Program operating policies
- Timesheets (must be signed by participant and supervisor)
- Staff and member roles
- Understanding the objectives of the program

### Member Training

Programs are required to provide participants with the training and skills, and knowledge they need to perform well in the assigned service project.

## Member Files

### Documentation in Member Files

You are required to certify each participant's enrollment, number of hours of service performed, and completion of terms of service. Records must show that a participant performed the 96 hours of service.

Supervisors and the Community Service Coordinator should conduct periodic reviews of participant files to ensure that service hours are being accurately tracked, that adequate documentation exists to verify all hours being applied and that participant files are current and complete.

### Required documentation for participant files:

- Application Form
- Signed member contract
- Start and end dates
- Hours of service (supported by timesheets and attendance records), location of service activities, and project assignments.
- Documentation of any disciplinary action; and
- Demographic and other information for use in program evaluations.
- Skills Assessment
- Monthly documentation notes

## SHA COMMUNITY SERVICE PROGRAM GUIDELINES

### The Community Service Ethic

The Centerpiece of the Community Service ethic is getting things done – improving communities by helping solve problems in the areas of education, public safety, the environment and other human needs. Other key aspects of the ethic are strengthening communities and developing participants' opportunities and civic responsibility.

### The Community Service Participant Application

Community Service participants will be assigned to appropriate program areas based upon information contained in the application form, interviews and references as the program deems appropriate.

### The Community Service Orientation

Orientation sessions for staff, site supervisors, and participants shall include a discussion on the national scope of Community Service.

The orientation shall also include an explanation of how the community service fits into the Community Service network of local service programs.

### Post Service Job Referrals

Community Service Programs are not required to provide job referrals for Community Service participants. However, many programs feel a responsibility to work with their Community Service participants throughout the year and especially toward the end of the term of service on advancing participants' career and educational goals. Activities can range from offering assistance with resume writing and preparation of college applications, to working with local employers to arrange job interviews or job placements.

### Participants vs. Employees

The definition of participant in the National and Community Service Act of 1990, as amended, applies to what is generally termed Community Service participants. As such, "a participant shall not be considered to be an employee of the in which the participant is enrolled." Moreover, participants are not allowed to perform an employee's duties or otherwise displace employees.

### Participants as Independent Contractors

Participants cannot be treated as independent contractors. They are enrolled in the program to perform direct community service. Programs are responsible for training and supervising participants, for assigning service activities, for supporting and evaluating performance, for safeguarding safety, and providing liability coverage (to be determined).

Community Service programs may not permit a participant to fill in for an absent employee. By law, participants may not under any circumstances perform services, duties, or activities that had been assigned to an employee or to an employee who has recently resigned or has been discharged. Programs may not use a participant in a way that will displace an employee or position or infringe on an employee's promotional opportunities.

#### Criminal or Juvenile Record

Because the eligibility of individuals with criminal records has not been restricted, programs must make case-by-case determinations. However, if a program provides service in particularly sensitive areas, such as working with young children, you shall consider whether the participation of individuals with certain criminal backgrounds would have a significant negative impact on the physical or psychological health of either participants or individuals served.

Similarly, programs shall consider carefully the impact of participant by an individual convicted of a violent felony or an offense related to the project activities (for example, someone with a burglary record where the program repairs the homes of elderly residents). The same recommendations apply for someone adjudicated as a juvenile offender.

Programs shall be aware that some states have laws related to placing individuals with criminal records in activities involving children. Program could be held liable for any negative consequences resulting from inadequate screening of participants in particularly sensitive areas. This also could affect a program's ability to obtain appropriate liability protection. Thus, the provisions require programs with participants or employees who have substantial contact with children (as defined by state law) or who perform services in the homes of children or individuals considered vulnerable by the program, to conduct criminal record checks on these participants or employees as part of the screening process, to the extent permitted by state and local law.

#### Former Employees



In general, programs may not select a participant who is or has been employed by a prospective program sponsor within six months of the time of enrollment in the program.

## Nondiscrimination Laws

You may not discriminate against any participant, program staff, or service recipient on the basis of race, color, national origin, religion, sex, age, political affiliation, or disability. Under federal law, programs are required to conduct a self-evaluation regarding accessibility for individuals with disabilities and for discrimination on the basis of sex. You must also comply with applicable state nondiscrimination laws.

## **SUPERVISION**

### Participant Contracts

The participant contract is the document that explains to a participant his or her responsibilities and rights as a community Service participant in a specific program. To provide clarity and prevent subsequent participant issues, CM shall review with the individuals the contract during orientation and have participants sign their contract. A copy of the each participant's signed contract must be kept in the participant's file.

The contract shall explain the participant's rights and responsibilities, and must include at a minimum:

- the minimum number of hours and other requirements, as dictated by the program, necessary for lease renewal;
- standards of conduct and sanctions for improper conduct;
- prohibited activities;
- requirements under the Drug Free Workplace Act;
- termination and suspension rules (including the specific circumstances under which a participant can be released for cause);
- a position description for the participant and grievance procedures;
- The program shall also include as part of the contract:
- The start and end dates of the participant's term on service (these dates shall correspond to the dates entered in the participant's file);

- The name of the participant's supervisor;
- The project assignment and service activities;
- Activity performance standards;
- An informed consent form and;
- Any other requirements established by the program.
- Prohibited Activities:
- There are certain activities – including lobbying, political, religious, or advocacy activities – that Community Service participants and staff may not perform in the course of their duties, while charging time to the community Service program, or at the request of program staff.
- The list of prohibited activities includes:
- Participating in efforts to influence legislation, including state or local ballot initiatives, or lobbying for your program;
- Organizing a letter-writing campaign to Congress;
- Engaging in partisan political activities, or other activities designed to influence the outcome of an election to any public office;
- Participating in, or endorsing, events or activities that are likely to include advocacy for or against political parties, political platforms, political candidates, proposed legislation, or elected officials;
- Voter registration drives;
- Organizing or participating in protests, petitions, boycotts, or strikes;
- Assisting, promoting, or deterring union organizing;
- Impairing existing contracts for services or collective bargaining agreements;
- Engaging in religious instruction;
- Conducting worship services;
- Providing instruction as part of a program that includes mandatory religious instruction or worship;
- Constructing or operating facilities devoted to religious instruction or worship;
- Maintaining facilities primarily or inherently devoted to religious instruction or worship;
- Engaging in any form of religious proselytizing;
- Providing a direct benefit to a for profit entity, a labor union, a partisan political organization, or an organization engaged in religious activities;

- Participating in activities that pose a significant safety risk to participants; and fundraising.
- Examples of activities that would fit into one of the above listed prohibited activities include:
  - Taking part in political demonstrations or rallies;
  - Participating in an internship with a for profit business as part of the education and training component of a program; or
  - Leading children in singing religious hymns.

However, community Service participants, like any other private citizens, may participate in any of the above activities on their own time, at their own expense, and at their own initiative. Program staff must also be able to document that their lobbying activity is separate and distinct from community service activity.

## Fundraising

In general, community Service participants cannot assist their organizations with major fundraising efforts. However, policy permits some limited activities related to fundraising by Community Service participants to the extent that such activities:

- “provide immediate and direct support to a specific and direct service activity; fall within the program’s approved direct service objectives; are not the primary activity of the program; and do not involve significant amounts of time for any participant.”

For example, participants may:

- Solicit supplies from local businesses for the direct service project e.g., solicit several cans of paint from a store near a work site to meet a need.
- Organize an occasional “serv-a-thon” in which participants recruit individuals to obtain sponsors in advance of an approved direct service event.

## Participant Confidentiality/Informed Consent Form

Information about individual participants must be kept confidential. Authorized participant information shall be released only to authorized recipients (such as the Social Service Agency Participants or Local TANF Office).

General or as required by law (such as pursuant to a subpoena or search warrant). To protect the program, prior written consent must be obtained of all participants before using their names, photographs, and other identifying information for publicity or promotional purposes.

Participant information must be released to the participating agency, the Local TANF Office, and authorized program evaluators.

### Drug Free Workplace

The Drug Free Workplace Act in 45 C.F.R. requires you to give notice about the Act to your employees and participants and to conduct a drug free awareness program. Compliance with this provision shall be documented in the program operation files and in each participant's file.

If an employee or participant is arrested for or convicted of a drug offense, he or she must notify Housing Authority in writing with five days appropriate actions must be taken (including suspension and referral to a drug rehabilitation program, or release for cause consistent with the Shreveport Housing authority rules on termination and suspension of service).

### Jury Duty

Serving on a jury is an important responsibility of citizenship. To strengthen the spirit of citizenship, participants shall be encouraged to serve jury duty and may not be penalized for doing so.

### Participant Safety

#### Safety Precautions to Protect Participants

Programs must have appropriate safeguards in place to ensure the safety of participants. Further, participants may not participate in projects or undertake service activities that pose a significant safety risk.

#### Specific Safety Procedures

The Shreveport Hosing Authority does not have a specific safety procedure that programs must follow. The "Participant Safety Protocol"

requires programs to establish appropriate policies related to the supervision of participants and mandates specific training (such as the proper use of power tools) to minimize risks to participants. In addition, the Protocol specifically prohibits programs from placing participants in situations where they will witness crimes, get involved in the arrest process, or handle legal evidence.

## **Voting**

### Organizing Voter Registration Drives

The Shreveport Housing Authority does not recognize voter registration drives as an acceptable service activity for Community Service participants. Even non-partisan voter registration efforts are prohibited.

### Participants Registering to Vote and Voting

Programs shall encourage eligible participants to register to vote. Programs may not require participants to register or to vote, or attempt to influence how participant vote.

Participants who are unable to vote before or after service hours shall be allowed to do so during their service time. That time may be made up on another day.

### Participant Death/Serious Injury

If a participant dies or is seriously injured while in service, the program director or designee shall immediately notify the Executive Director of the Shreveport Housing Authority. The program director shall give the Executive Director as much information as possible including the participant's name, home address, and phone number, next of kin, and the circumstances of the death or injury.

Release of a Participant from the Program may occur for:

- compelling personal circumstances; or
- cause.

### Releasing for Compelling Personal Circumstances

If a participant wants to leave the program, the participant has the primary responsibility for demonstrating that compelling personal circumstances prevent him or her from completing their term of service. You have the authority to determine whether or not the participant's reason for leaving is a "compelling personal circumstance." Programs

must document the basis for any determination that compelling personal circumstances prevent the participant from completing the term of service.

Consequences of releasing a participant for compelling personal circumstances:

- As an alternative to releasing a participant, the program may, after determining that compelling personal circumstance exist, suspend the participant's term of service for up to six months (or longer if approved by the Shreveport Housing Authority based on extenuating circumstances) to allow the participant to complete service with same or a similar Community Service program at a later time.

Compelling personal circumstances include:

1. Those that are beyond the participant's control, such as, but not limited to:
  - A. A participant's disability or serious illness;
  - B. Disability, serious illness, or death of a participant's family member, if it makes completing a term unreasonably difficult or impossible; or
  - C. Conditions attributable to the program or otherwise unforeseeable and beyond the participant's control, such as a natural disaster, a strike, relocation, of a spouse, or the nonrenewable or premature closing of a project or program,
2. Those that Shreveport Housing Authority has, for public policy reasons, determined as such, including:
  - A. Military service obligations;
  - B. Acceptance by a participant of an opportunity to make the transition from welfare to work; or
  - C. Acceptance of an employment opportunity (of 30 hours weekly or more) by a participant serving in the program.

Compelling personal circumstances do not include leaving a program:

1. Because of dissatisfaction with the program.

## Releasing a Participant for Cause

A release for cause encompasses any circumstances other than compelling personal circumstances that warrant an individual's release from compelling a term of service.

These could include anything from disciplinary removals pursuant to the program's contract with the participant, to the participant's decision to leave for any reason that is not a compelling personal circumstance. The term "for cause" does not necessarily have the same meaning as under traditional employment law. Any reason for leaving other than compelling personal circumstances is for cause under the National and Community Service Act 1990 as amended.

Community Service programs must release for cause any participant who is convicted of a felony or the sale or distribution of a controlled substance during a term of service.

Consequences of releasing a participant for cause:

- An individual who is released for cause must disclose this fact in any subsequent applications to participate in a Community Service program. In every case where a participant leaves a program, you must submit an End of Term/Exit Form.

The director's reasons for the determination shall be as specific and detailed as possible, and shall be consistent with the regulations noted.

A participant charged with a crime during a term of service:

If a participant is charged officially with a felony, you must suspend him or her without receiving credit for missed hours. This is a minimum requirement. He or she may resume service if found not guilty or if the charge is dropped. If convicted, he or she must be released for cause.

## ATTACHMENTS

### Community Service Tenant File

The Community Service file will contain all information pertinent to the community service program. The Community Service file



will be maintained by the case manager is assigned to work with the participant.

After the participant completes the move in process, and it is determined they are eligible for community service, they will be referred to the Resident Service Office to meet with the case manager. The case manager will complete the skills assessment and develop a community service plan.

## ATTACHMENT

### Community Service Compliance Check List

The PHM will be responsible for completing the forms attached to the Community Service Check List at move in and/or re-certification. After completing the move in process, and determining the resident eligible for community service, the

PHM will refer the participant to the community service case manager.

Prior to re-certification, the PHM shall inquire from the community service case manager the participant's compliance status.

The documents attached to the Compliance Check List are to be filed in the resident's permanent file.

ATTACHMENT Sample Letters

The sample letter are attached demonstrate what procedure will be used to implement the community service with the community partners.

Final Notice sample letter is attached to demonstrate the notification process from the PHM prior to starting the eviction process.

Notice of Eviction sample letters will demonstrate what the eviction letter that will be used to file in court for non-compliance.

## ATTACHMENT

Code of Federal Regulations Title 24, Volume 4  
Revised as of April 1, 2003  
From the U.S. Government Printing Office via GPO Access  
CITE: 24CFR960

FOR YOUR REVIEW

BY  
TERRI HINES

## FY 2011 ANNUAL PLAN RAB COMMENTS

The Housing Authority of the City of Shreveport met with the RAB on Monday, July 11, 2011 at 10:00 a.m. Present at the meeting was Freddie Shaw, Yazzie Bishop and Louise Kelly representing the RAB, Terri Hines and Richard Herrington Jr, Executive Director representing HACS.

The plan was gone over in its entirety. No written comments were submitted by residents. The RAB did present the following verbal comments.

- 1 – Increase or make changes of Community Room space. This was explained as a HACS management issue and will be addressed with staff.
- 2 – Purchase of computers for resident use. We will check for use with grants or any other unused eligible funds.
- 3 – Laundry Facilities at Wilkerson Terrace. HACS staff will work with existing vendor and site management.
- 4 – Hollywood Heights driveways and carports. This is included in FY 2013.